

Information Release

Department of Health, Social Services and Public Safety

July 2005

Statistics on Smoking Cessation Services in Northern Ireland: Quarter Summary Report, 1st January 2005 to 31st March 2005.

This information release, produced by the Department of Health, Social Services and Public Safety's Hospital Information Branch, provides quarterly summary information on smoking cessation services for the period 1st January to 31st March 2005.

Information within this report has been produced from a new web based recording system. Data is downloaded at a particular point in time. Figures here are correct as of 5th July 2005.

Summary

Within Health Boards in Northern Ireland, during the period 1st January to 31st March 2005:

- 3,520 people set a quit date through the smoking cessation services. This is an increase of 336 (11%) on the figure for the same reporting period in 2003.
- Of those setting a quit date, the majority (83%) were aged 18-59 years: 3% were aged under 18, 28% were aged 18-34, 26% were aged 35-44, 29% were aged 45-59, and 13% were aged 60 and over.
- The majority of people received Nicotine Replacement Therapy (NRT) or bupropion (Zyban). 72% of people received NRT only, 1% received bupropion only, 0.4% received both NRT and bupropion and 27% received neither or treatment was not known.
- At the 4 week follow-up 1,885 had successfully quit (based on self-report), 54% of those setting a quit date. This is an increase of 3 percentage point from the figure for the same reporting period in 2003.
- At the 4 week follow-up, of those who successfully quit (based on self-report), 737 had their non-smoking status confirmed by CO validation, 21% of those setting a quit date. However, smoking cessation services did not attempt CO validation on all people who had successfully quit at the 4 week follow-up (based on self-report). This is a decrease of 27 percentage point from the figure for the same reporting period in 2003. This can be partly explained as a result of difficulties in the use of the appropriate equipment to carry out the CO validation tests.

Introduction

It is estimated that smoking causes between 2,700 and 3,000 deaths here each year. It is the single greatest preventable cause of premature death and avoidable illness. The 5-year Northern Ireland Tobacco Action Plan, issued for consultation in August 2002, set targets for reducing the prevalence of smoking among adults, pregnant women and young people (aged 11-16). The development of cessation services is a key element of the overall aim to tackle smoking.

The Continuous Household Survey, which biennially includes questions about smoking, showed that, in 2000/01, adult smoking prevalence was 27% (26% males and 28% females). In the same survey, over three quarters (76%) said that they would like to give up smoking. Giving up is not easy because nicotine is highly addictive and repeated quit attempts may be required before total abstinence is achieved.

Background

Smoking cessation services provide a new approach to helping people to quit smoking. They include the provision of **brief opportunistic advice** by a range of health professionals and **specialist services** in appropriate settings. Only the latter are monitored centrally. Both services are defined in **Annex A**.

The Department of Health, Social Services and Public Safety developed monitoring arrangements for smoking cessation services in the four Health Boards. Each Health Board was required to provide information on a quarterly basis to enable the Department to monitor figures. The central requirements for the monitoring returns are kept to a minimum and are designed to be a subset of the information required locally to monitor and evaluate the service. This bulletin provides an analysis of these monitoring returns.

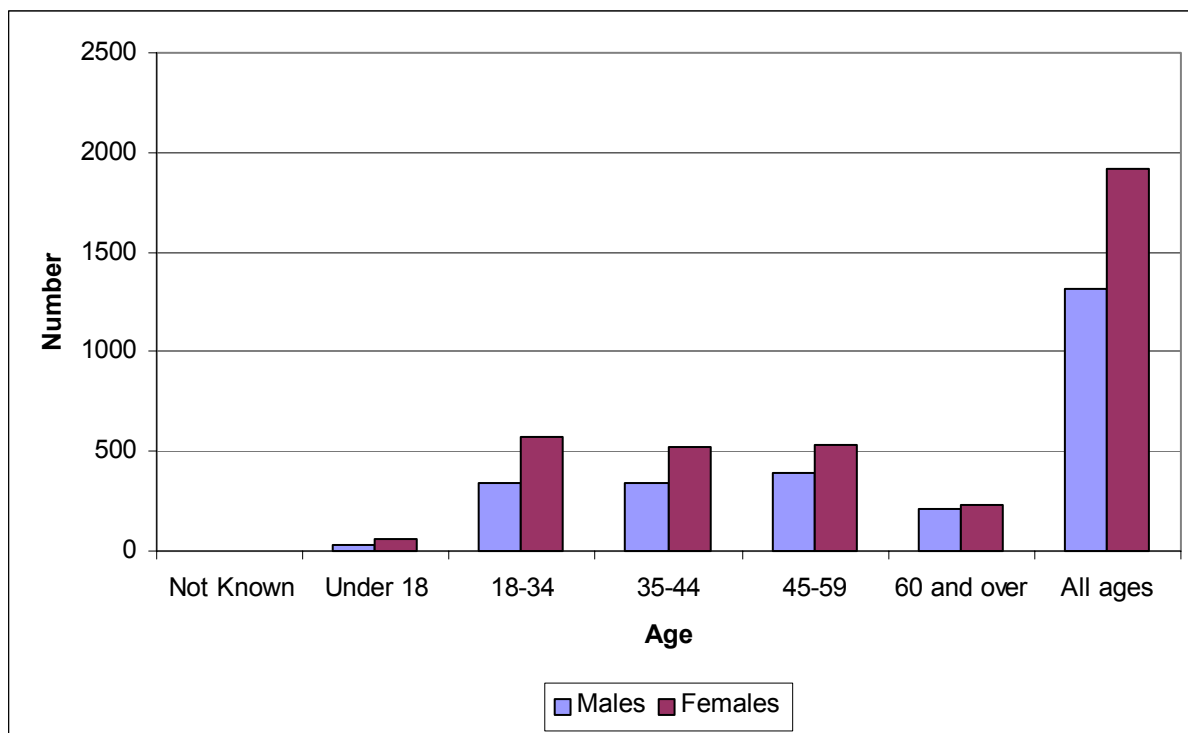
Results

Clients setting a quit date

(Figure 1, Summary Tables)

During the quarter 1st January 2005 to 31st March 2005, a total of 3,520 people set a quit date in smoking cessation services. Three-fifths (60%) were women, although the prevalence of smoking is similar for men (26%) and women (28%). The majority (83%) were aged 18-59 years: 28% were aged 18-34, 26% were aged 35-44, 29% were aged 45-59. At the age extremes, 4% were under 18, and 13% were aged 60 and over.

Figure 1 Numbers setting a quit date by age and gender



Therapeutic Interventions

(Summary Tables)

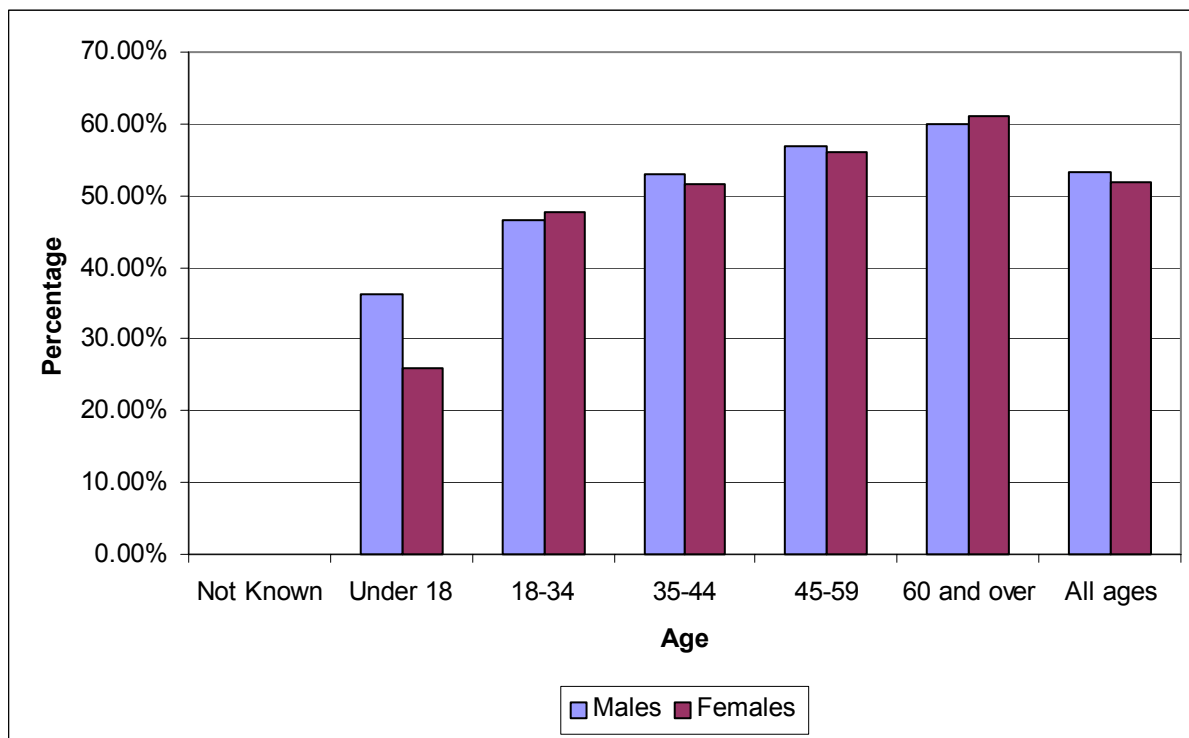
The use of supportive drug therapy in the attempt to quit smoking was recorded for each client. Nicotine Replacement Therapy was the most popular choice with 72% of those who set a quit date opting for NRT only. Just 1% received bupropion (Zyban) only while only 0.4% received both NRT and bupropion either concurrently or consecutively. 8% of those setting a quit date did not receive either medical assistance and for 19% the treatment option was unknown.

Outcome at 4 week follow-up (Figures 2,3 and Summary Tables)

The cessation services were expected to follow up clients to find out their smoking status 4 weeks after the quit date, based on self-report by the client. At 4 weeks a successful quitter is defined as someone who had not smoked over the previous two week period (the first two weeks are ignored to allow for initial lapses).

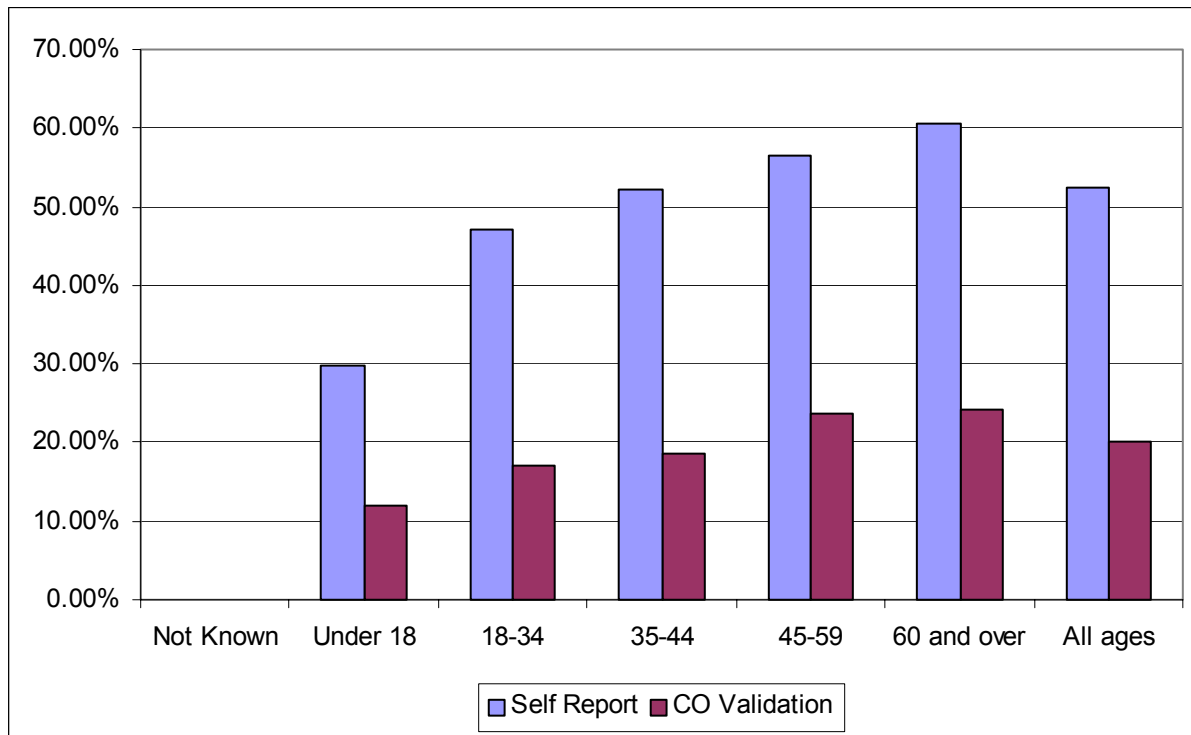
At the 4 week follow-up 54% of all those setting a quit date had successfully quit (based on self-report). Just over a fifth (22%) of all those setting a quit date were unable to be contacted for the follow-up at 4 weeks. In addition specialist services were also asked to confirm non-smoking status by carbon monoxide (CO) validation: 21% of those setting a quit date had their non-smoking status confirmed by CO validation (compared with 54% for self-report).

Figure 2 Percentage who had successfully quit at 4 week follow-up (self report) by age and gender



The most successful age group at 4 weeks was the 60 and over for both self-report and CO validation, with 63% and 26% respectively.

Figure 3 Percentage who had successfully quit at 4 week follow-up (self report and CO validation) by age



Due to technical difficulties with the monitoring system, pregnant women were unable to be separately identified as setting quit dates through the smoking cessation services.

Health Board Comparisons (Board Summary Tables)

These tables show data for the four Health Board Areas separately (Eastern, Northern, Southern, and Western).

The Eastern and Northern Boards accounted for over three fifths (64%) of those setting a quit date. The Northern Board had the most successful quit rate at the 4 week follow-up point for the self report, 66%. The EHSSB has the most successful quit rate at the 4 week follow-up point for the CO validation, 41%.

Editorial notes

For the purpose of clarity, figures are shown in accordance with the Department of Health's publication conventions. These are as follows:

- . not applicable
- .. not available
- zero
- 0 less than 0.5

Numbers greater than or equal to 0.5 are rounded to the nearest integer.

Additional Information

It is proposed to update this bulletin quarterly. Constructive comments on the bulletin would be welcomed. Any questions concerning the data in this publication, or requests for further information on smoking cessation services in Northern Ireland is available from:

Hospital Information Branch
Department of Health, Social Services and Public Safety
Annexe 2
Castle Buildings
Stormont
BT4 3SQ
Internet address: <http://www.dhsspsni.gov.uk/stats&research/pubs.asp>

Annex A

1. Data Quality

There was considerable variation in the speed with which the four Health Boards were able to set their data recording routines. The four Health Boards were asked to submit data to the Department of Health quarterly in 2001/2002, with more detail in an annual return. It should be noted that on the Monitoring form Part B (Equality section) not all the questions were answered by the clients. Some of the figures presented may not add up to 100% due to rounding. Action has been taken to improve the quality of the data recorded in the future.

2. Health Boards

Within Northern Ireland there are four Health Boards, Eastern, Northern, Southern, and Western, each with their own provision of smoking cessation services throughout their health area. The set up of these services and the collection of data developed independently in each of the four boards.

In January 2000, the Eastern Board started up their services and began to collect data, regarding the clients using the services, via the monitoring forms. At the same time Causeway clinic services, within the Northern Board, began to run similar services. The Mid-Ulster pilot scheme followed suit in the summer of 2001. By January 2002 all services in place within the Northern Board were up and running and collating the returns via the monitoring forms established by DHSSPS. The Western Board services and data collection began in the first quarter of 2000 (April to June 2000). As for the Southern Board, a commissioning pilot, for two clinics, was established in January 2001 and by January 2002 all services that were set up were using the monitoring forms.

3. Definitions

Services

- **Brief interventions** by General Practitioners (GPs) and other health professionals. These will be provided in the normal course of the professional's duties rather than comprising a 'new' service, and monitoring information about clients in receipt of such interventions is not therefore required centrally.
- **Specialist smoking cessation clinics/services**, usually clinics, run by smoking cessation specialist(s) who have received training for this role. The clinic/service will be evidence based and offer intensive treatment, usually in the form of one to one or group support over the course of five to six weeks, including the use of Nicotine Replacement Therapy. Clients may also receive treatment one to one if for any reason group sessions are judged not to meet their needs. Such a clinic/service may be situated in a major hospital, although it could be based in a community setting, have outreach clinics or operate on a peripatetic basis.

Quit Date

It is recognised that in certain cases some time may need to be spent with clients before they are ready to set a quit date. However only actual quit attempts are counted for monitoring.

On the basis that the clinical viewpoint tends to be that a client should not be counted as a 'failure' if he/she has smoked in the difficult first days after the quit date, a client is counted as having successfully quit smoking if he/she has not smoked at all since two weeks after the quit date.

Follow-up

The four-week follow-up (and CO validation, if appropriate) must be completed within six weeks of the quit date. Persons not contacted within this time are treated as lost to follow-up for evaluation purposes.

Carbon monoxide (CO) validation

CO monitoring is normally carried out with all clients of the specialist smoking cessation clinics/services who self report as not having smoked since two weeks after the quit date, at both the four week and fifty-two week points.

Fifty-two week follow-up

All clients of the specialist clinics/services who self reported as having quit smoking at the 4 week follow-up should be followed up again at 52 weeks, and their smoking status validated by CO monitoring.

SUMMARY TABLES

Summary

Number setting quit date:

3520

Age groups setting quit date:	Not Known	%	Under 18	%	18-34	%	35-44	%	45-59	%	60 and over	%	All ages
	0	0.00%	128	3.64%	988	28.07%	930	26.42%	1004	28.52%	470	13.35%	3520

Numbers setting a quit date by age and gender

	Not Known	Under 18	18-34	35-44	45-59	60 and over	All ages	Total %
Males	0	47	360	372	427	219	1425	40.48%
Females	0	81	628	558	577	251	2095	59.52%
Total	0	128	988	930	1004	470	3520	100.00%

Number of pregnant women:

9

Number receiving NRT etc:	NRT only	%	Zyban only	%	Both	%	Neither	%	Unknown	%
	2551	72.47%	18	0.51%	15	0.43%	272	7.73%	664	18.86%

4 week follow up quit no.:	Self Report	%	CO validation	%	Lost	%
	1885	53.55%	737	20.94%	787	22.36%

Percentage who had successfully quit at 4 week follow-up(self report) by age and gender.

	Not Known	Under 18	18-34	35-44	45-59	60 and over	All ages
Males	-	34.04%	47.22%	54.30%	57.61%	63.47%	54.25%
Females	-	29.63%	48.41%	52.33%	58.06%	62.55%	53.08%

Percentage who had successfully quit at 4 week follow-up(self report and CO Validation) by age.

	Not Known	Under 18	18-34	35-44	45-59	60 and over	All ages
Self Report	-	31.25%	47.98%	53.12%	57.87%	62.98%	53.55%
CO Validation	-	12.50%	18.02%	19.03%	24.20%	26.17%	20.94%

BOARD SUMMARY TABLES

Boards

	Number setting quit date					
	Male	% of Total	Female	% of Total	Total	% of NI Total
Eastern	409	37.56%	680	62.44%	1089	30.94%
Northern	486	41.40%	688	58.60%	1174	33.35%
Southern	306	42.44%	415	57.56%	721	20.48%
Western	224	41.79%	312	58.21%	536	15.23%
NI Total	1425	40.48%	2095	59.52%	3520	100.00%

	Age groups setting quit date:												
	Not Known	%	Under 18	%	18-34	%	35-44	%	45-59	%	60 and over	%	All ages
Eastern	0	0.00%	28	2.57%	285	26.17%	274	25.16%	358	32.87%	144	13.22%	1089
Northern	0	0.00%	38	3.24%	374	31.86%	327	27.85%	302	25.72%	133	11.33%	1174
Southern	0	0.00%	37	5.13%	196	27.18%	195	27.05%	189	26.21%	104	14.42%	721
Western	0	0.00%	25	4.66%	133	24.81%	134	25.00%	155	28.92%	89	16.60%	536
NI Total	0	0.00%	128	3.64%	988	28.07%	930	26.42%	1004	28.52%	470	13.35%	3520

	Number of Pregnant Women*		
	Total setting quit date	no. successful at 4weeks (self Report)	% successful
Eastern	0	0	-
Northern	0	0	-
Southern	0	0	-
Western	0	0	-
NI Total	0	0	-

* - Informattion not available due to data quality problems.

BOARD SUMMARY TABLES

	Number receiving NRT etc:									
	NRT only	%	Zyban only	%	Both	%	Neither	%	Unknown	%
Eastern	836	76.77%	6	0.55%	9	0.83%	55	5.05%	183	16.80%
Northern	975	83.05%	3	0.26%	2	0.17%	61	5.20%	133	11.33%
Southern	427	59.22%	4	0.55%	2	0.28%	103	14.29%	185	25.66%
Western	313	58.40%	5	0.93%	2	0.37%	53	9.89%	163	30.41%
NI Total	2551	72.47%	18	0.51%	15	0.43%	272	7.73%	664	18.86%

	4 week follow up based on self report			
	Male	% of NI Total	Female	% of NI Total
Eastern	221	28.59%	355	31.92%
Northern	334	43.21%	436	39.21%
Southern	133	17.21%	188	16.91%
Western	85	11.00%	133	11.96%
NI Total	773	100.00%	1112	100.00%

	4 week follow up (% based on no. setting quit date)					
	Self Report	%	CO Validation	%	No. Setting quit date	%
Eastern	576	52.89%	441	40.50%	1089	100.00%
Northern	770	65.59%	7	0.60%	1174	100.00%
Southern	321	44.52%	272	37.73%	721	100.00%
Western	218	40.67%	17	3.17%	536	100.00%
NI Total	1885	53.55%	737	20.94%	3520	100.00%